

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

RECEIVED  
E-MAIL  
JUL 16 2008

**COMMITTEE NAME** (Must be same as on Statement of Organization)

LU BARRON FOR SUPERVISOR RE-ELECTION COMMITTEE

**IMPORTANT:** Indicate by # type of committee you are reporting for: 5

( 1 ) Statewide/Legislative/Judge Standing for Retention Candidate ( 2 ) State PAC ( 3 ) State Party  
( 4 ) County Central Committee ( 5 ) County Candidate ( 6 ) City Candidate ( 7 ) School Board or Other Political  
Subdivision Candidate ( 8 ) County PAC ( 9 ) City PAC ( 10 ) School Board or Other Political Subdivision PAC ( 11 ) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

LU BARRON

Political Party (if applicable)

DEMOCRAT

Office Sought

COUNTY SUPERVISOR

District (if Senate or House)

FORM

**DR-2**

(Rev. 07/2007)

DISCLOSURE  
REPORT

**For Office Use Only**

Comm. # \_\_\_\_\_

Logged In \_\_\_\_\_

Scanned \_\_\_\_\_

Computer \_\_\_\_\_

Audited \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

[Signature]  
SIGNATURE OF PERSON FILING REPORT

319-366-7641  
TELEPHONE

7/15/08  
DATE SIGNED

I AM FILING A JULY 19, 2008

(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in  
which Election is held

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 8,578.18

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

2,240.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 10,818.18

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

1,222.37

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

\$ 9,595.81

**\*\*UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$ 0.00

**\*\*IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$ 0.00

**\*\*OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$ 0.00

**CONSULTANT BREAKDOWN** (Schedule G Attached?)

YES ☒ NO

**CANDIDATE COMMITTEES ONLY:**

**VALUE OF CAMPAIGN PROPERTY** (From Schedule H - Attach Schedule H)

\$ 0.00

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)



SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

LU BARRON FOR SUPERVISOR RE-ELECTION COMMITTEE

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
05/25/08	ID# CK# 8152	JAMES A. JESSEN 1522 MARTIN CREEK RD MARION IA 52302		\$50.00	<input type="checkbox"/>
05/29/08	ID# CK# 4400	F. JAMES BRADLEY 2007 1ST AVE SE CEDAR RAPIDS IA 52402		\$50.00	<input type="checkbox"/>
05/24/08	ID# CK# 3070	JOHN M. SMITH 2302 HILLCREST DR SE CEDAR RAPIDS IA 52403		\$100.00	<input type="checkbox"/>
05/09/08	ID# CK# 11323	LYNN A. P. HADJIS 3524 RANDOM RD SE CEDAR RAPIDS IA 52403		\$100.00	<input type="checkbox"/>
05/21/08	ID# CK# 9186	CAROL W. HELBLING 721 BEAVER RIDGE CT SE CEDAR RAPIDS IA 52403		\$200.00	<input type="checkbox"/>
05/14/08	ID# CK# 4454	JULIE M. SATTLER 2010 TIMBER WOLF TRL SE CEDAR RAPIDS IA 52403		\$210.00	<input type="checkbox"/>
05/14/08	ID# CK# 8939	DIANE H. RAMSEY 514 FAIRVIEW DR SE CEDAR RAPIDS IA 52403		\$250.00	<input type="checkbox"/>
05/20/08	ID# CK# 7339	DENNIS A. DRAHOS 1477 BERTRAM ST CEDAR RAPIDS IA 52403		\$500.00	<input type="checkbox"/>
05/28/08	ID# CK# 1056	HUNTER P. PARKS 120 3RD ST SW CEDAR RAPIDS IA 52404		\$200.00	<input type="checkbox"/>
05/30/08	ID# CK# 2269	ALLEN R. CHAPMAN 2917 OLD ORCHARD RD NE CEDAR RAPIDS IA 52402		\$50.00	<input type="checkbox"/>

SUB-TOTAL

\$ 1710.00

TOTAL (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2  
(for Schedule A)

For Instructions, See Back of Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

LU BARRON FOR SUPERVISOR RE-ELECTION COMMITTEE

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

**STATE CANDIDATES NOTE:** IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

**NOTE:** ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
05/30/08	ID# CK# 4854	THOMAS A. PARKS 177 RYECROFT SE CEDAR RAPIDS IA 52403		\$300.00	<input type="checkbox"/>
05/31/08	ID# CK# 841	JOYCE J. NIELSEN 2702 Q AVE NW CEDAR RAPIDS IA 52405		\$30.00	<input type="checkbox"/>
06/05/08	ID# CK# 31057	CEDAR RAPIDS AREA CHAMBER OF COMMERCE, 424 1ST AVE NE CEDAR RAPIDS IA 52402		\$100.00	<input type="checkbox"/>
06/29/08	ID# CK# 8301	THOMAS M. HAYDEN 3123 PINNEY WOODS LANE SE CEDAR RAPIDS IA 52403		\$100.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 530.00

TOTAL (if last page of this schedule)

\$ 2240.00

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF</b> <b>AMENDING FORM</b>	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

LU BARRON FOR SUPERVISOR RE-ELECTION COMMITTEE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
06/10/08	ID# CK# 1104	MAILING SERVICES INC. 200 50TH AVE DR SW STE B CEDAR RAPIDS IA 52404	SET UP, INKJET LETTER W/INDICIA, MAILSTREAM DATA	\$ 197.22
06/10/08	ID# CK# 1105	LU BARRON 195 BRAYBROOK SE CEDAR RAPIDS IA 52403	REIMBURSEMENT FOR VOTER DATA REC'D 5/10/08 (\$10), GAS CARDS FOR VOLUNTEERS 6/3/08	1025.15
	ID# CK#		(\$50), PORTRAIT TAKEN 4/5/08 (\$40), VOICE BROADCASTING FOR ROBO CALLS (\$189.72), US	
	ID# CK#		POSTAL SERVICE FOR MAILING 5/7/08 (\$329.77), US POSTAL SERVICE FOR MAILING 5/28/08	
	ID# CK#		(\$405.66)	
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 1222.37
TOTAL (if last page of this schedule)				\$ 1222.37

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)